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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Barry GAVE
AUTHORIZATION BY PHONE TO
CORRECT Articles
DATE 3/24/05 DOC. EXAM D White
a will

Office Use Only

D. WHITE MAR 24 2005



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03/16/05--01018--005 **78.75

TRANSMITTAL LETTER

Department of State Division of Corporations P.O. 6327 Tallahassee, FL 32314 Subject: Barry Lind, PA (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: () \$35.00 () \$43.75 () \$70.00 (X) \$78.75 From: Mr. Barry Lind Name P.O. Box 841054 Address Pembroke Pines, FL 33084 City, State & Zip (954) 450-1206 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION FILED

2003 WAR 16 A 10: 35

The undersigned incorporator (s), for the purpose of forming a corporation under the TASSEC, FLUKIJA Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE ! NAME

The Name of the corporation shall be:

Barry Lind, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. Box 841054 Pembroke Pines, FL 33084

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares of common

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mr. Barry Lind 1910 NW 85th Way Pembroke Pines, FL 33024

ARTICLE V INCORPORATOR (S)

The name (s) and street address (es) of the incorporator (s) to these Articles of Incorporation is (are) :

Mr. Barry Lind P.O. Box 841054 Pembroke Pines, FL 33084

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The purpose of the corporation shall be the practice of law.

The undersigned incorp	porator (s)	has (have)	executed these Articles of Incorporation this
Ninth (9th)	day of Mar	ch, 2005	
		X_	Bour Sind
		'	l signature
		<u>.</u>	
			signature

Article of Incorporation Filling Fee - \$35

signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE $_{0.35}$

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Barry Lind, PA				
2. The name and address of the register	red agent and office is:				
	Mr. Barry Lind				
	(Name)				
	1910 NW 85th Way				
	(P.O. Box not acceptable)				
	Pembroke Pines, FL 33024				
	(City/State/Zip)				

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

x Bauy Simul (Signature)